

FILED  
JUN 25 PM 3:28  
CLERK OF DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

1 Edgar Lee WARREN  
2 35 COUNTY CENTER DR.  
3 OROVILLE CA 95965  
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5  
6  
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8 UNITED STATES DISTRICT COURT  
9 NORTHERN DISTRICT OF CALIFORNIA

10 Edgar Lee WARREN

11 Plaintiff,

12 vs.

13 GOVERNOR ARNOLD  
14 SCHARZENEGGER,  
Butte County Jail

15 Defendant.

CV 08

3077

CASE NO. \_\_\_\_\_

PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS

MHP

(PR)

16 I, Edgar Lee WARREN, declare, under penalty of perjury that I am the  
17 plaintiff in the above entitled case and that the information I offer throughout this application  
18 is true and correct. I offer this application in support of my request to proceed without being  
19 required to prepay the full amount of fees, costs or give security. I state that because of my  
20 poverty I am unable to pay the costs of this action or give security, and that I believe that I am  
21 entitled to relief.

22 In support of this application, I provide the following information:

23 1. Are you presently employed? Yes \_\_\_ No X

24 If your answer is "yes," state both your gross and net salary or wages per month, and give the  
25 name and address of your employer:

26 Gross: \_\_\_\_\_ Net: \_\_\_\_\_

27 Employer: \_\_\_\_\_

28 \_\_\_\_\_

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 NONE I WAS ON SSI

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

9 a. Business, Profession or Yes \_\_\_ No X

10 self employment

11 b. Income from stocks, bonds, Yes \_\_\_ No X

12 or royalties?

13 c. Rent payments? Yes \_\_\_ No X

14 d. Pensions, annuities, or Yes \_\_\_ No X

15 life insurance payments?

16 e. Federal or State welfare payments, Yes \_\_\_ No X

17 Social Security or other govern-

18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 NONE

23 3. Are you married? Yes \_\_\_ No X

24 Spouse's Full Name: WARREN WAS MARRIED BUT NOT ANY

25 Spouse's Place of Employment: MORE.

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ NONE Net \$ NONE

28 4. a. List amount you contribute to your spouse's support: \$ NONE

- b. List the persons other than your spouse who are dependent upon you for support and indicate how much you contribute toward their support. (NOTE: For minor children, list only their initials and ages. DO NOT INCLUDE THEIR NAMES.).

NONE and WARREN WAS ON SSI

5. Do you own or are you buying a home? Yes \_\_\_ No ☒

Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

6. Do you own an automobile? Yes \_\_\_ No ☒

Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

Is it financed? Yes \_\_\_ No ☒ If so, Total due: \$ \_\_\_\_\_

Monthly Payment: \$ \_\_\_\_\_

7. Do you have a bank account? Yes \_\_\_ No ☒ (Do not include account numbers.)

Name(s) and address(es) of bank: NONE

NONE

Present balance(s): \$ \_\_\_\_\_

Do you own any cash? Yes \_\_\_ No ☒ Amount: \$ \_\_\_\_\_

Do you have any other assets? (If "yes," provide a description of each asset and its estimated market value.) Yes \_\_\_ No ☒

NONE

8. What are your monthly expenses?

Rent: \$ NONE Utilities: \_\_\_\_\_

Food: \$ \_\_\_\_\_ Clothing: \_\_\_\_\_

Charge Accounts:

Name of Account	Monthly Payment	Total Owed on This Acct.
NONE	\$ _____	\$ _____
_____	\$ _____	\$ _____
_____	\$ _____	\$ _____

9. Do you have any other debts? (List current obligations, indicating amounts and to whom they are payable. Do not include account numbers.)

not that I know

10. Does the complaint which you are seeking to file raise claims that have been presented in other lawsuits? Yes \_\_\_ No X

Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in which they were filed.

I have lawsuit in this court but not on the same issues

I consent to prison officials withdrawing from my trust account and paying to the court the initial partial filing fee and all installment payments required by the court.

I declare under the penalty of perjury that the foregoing is true and correct and understand that a false statement herein may result in the dismissal of my claims.

June

DATE

Edgar Lee Warren

SIGNATURE OF APPLICANT

Case Number: \_\_\_\_\_

**CERTIFICATE OF FUNDS**

**IN**

**PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of Edgar Lee Warren for the last six months at

[prisoner name]

Butte County Jail where (s)he is confined.

[name of institution]

I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ 0 and the average balance in the prisoner's account each month for the most recent 6-month period was \$ 55 &.

Dated: June

[Authorized officer of the institution]

Butte County Jail will not give the right form about how much money Edgar Lee Warren had on the books in - 6 - and only 55 & - and Butte County Jail and officers will not put their signature on the forms and Warren had 55 & - for only with-in - 6 - month so we're signature: Edgar Lee Warren  
DATE JUNE

**B POD 66B**6/10/2008  
11:40:37 AMCANTEEN CORPORATION  
BUTTE COUNTY JAIL  
Pick List

Name: EDGAR WARREN

Inv. Date: 06/10/2008

Id: 137286

Module: B POD 66B

Invoice: 5276315

Serial #: 000017

Qty	Item	Code #	Price	Amount
1	BUTTE IND KIT	8372	\$0.00	\$0.00
1	IBUPROFEN 4TAB-BIND	6602	\$0.00	\$0.00
2				
	Previous Balance:	\$0.55	Base Sale:	\$0.00
	New Balance:	\$0.55	Debitek:	\$0.00
			Tax:	\$0.00
			Total:	\$0.00

Signature: \_\_\_\_\_

NEW CODE FOR SPEED STICK 2OZ 8112.